Why do I need a glucose screening test during pregnancy?

Women between 24 and 28 weeks of pregnancy are routinely screened for gestational diabetes, a high-blood-sugar condition that develops in up to 6%—7% of expectant mothers.¹

The screening test aims to identify women who may have gestational diabetes. A positive test does not necessarily mean that you have the condition, but it does mean that you will need to take the glucose tolerance test to get more definitive results.

If you were already diagnosed with diabetes before the pregnancy, you won't be required to take the test. Instead, your practitioner will discuss ways to manage your condition during pregnancy.

How is the glucose screening test done?

Typically, you're given a sugar solution that contains 50 grams of glucose and tastes very sweet. Keep in mind that:

- You will need to drink it all within 5 minutes.
- One hour later, a blood sample will be taken from your arm to see how efficiently your body processes sugar.
- Results should be available in a few days.

If the reading is too high, you'll be asked to come back for a 3-hour glucose tolerance test. The good news is that most women whose screening test shows elevated blood sugar don't turn out to have gestational diabetes.

Preserve your baby's newborn stem cells

Your baby's umbilical cord is filled with powerful newborn stem cells. You have a once-in-a-lifetime opportunity to preserve them and potentially help protect your child's health now and in the future.



They're powerful.

Newborn stem cells have been used in stem cell transplants for over 30 years¹ to treat over 80 conditions including certain cancers as well as blood and immune disorders.²



They're smart.

Beyond current uses, researchers are excited about the potential new uses for newborn stem cells in regenerative medicine since they "know" how to find injured cells in the body and start a healing process.³



They're special.

Newborn stem cells are different from adult stem cells because they're in their youngest and healthiest state. Preserving them now means they'll be available should your family be able to benefit from them in the future.^{3,4}



Our team is available to guide you through this process. Contact us at

1.888.CORD BLOOD (1.888.267.3256) or visit **cordblood.com.**

References: 1. Ballen K. Update on umbilical cord blood transplantation. F1000Res. 2017;6:1556. doi: 10.12688/f1000research.11952.1 2. Mayani H, Wagner JE, Broxmeyer HE. Cord blood research, banking, and transplantation: achievements, challenges, and perspectives. Bone Marrow Transplant. 2020;55(1):48-61. doi:10.1038/s41409-019-0546-9 3. Couto PS, Bersenev A, Verter F. The first decade of advanced cell therapy clinical trials using perinatal cells (2005/2015). Regenerative Medicine. 2017;12(8):953-968. doi:10.2217/rme-2017-0066. 4. Ballen KK, Verter F, Kurtzberg J. Umbilical cord blood donation: public or private? Bone Marrow Transplant. 2015;50:1271-1278.

Ultimate use of newborn stem cells will be determined by the treating physician who will consider if they are applicable for the condition and should come from the patient or a suitable donor. There is no guarantee that treatments being studied in the laboratory, clinical trials, or other experimental treatments (including regenerative medicine applications) will be available in the future.

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Simple ways to prepare for a healthier future.





Will the test make me feel sick?

Some women find that the glucose solution makes them feel nauseated. Clinics may offer the drink chilled, or you might be able to drink it over ice to make it more palatable. Ask your doctor about the options and restrictions you have before taking the test.

What is an abnormal blood glucose level?



In most cases, if your 1-hour blood sugar level is higher than 140 milligrams of glucose per deciliter of blood plasma, you may have an abnormal level and will need to take the glucose tolerance test in order to reach a definitive diagnosis. Some practitioners, however, put that cutoff at 130 mg/dL.



If your blood glucose level for this screening is higher than 200 mg/dL, most practitioners will automatically consider you to have gestational diabetes, and you won't be required to take the glucose tolerance test.

What's the glucose tolerance test like?

Most often, you are tested first thing in the morning on an empty stomach. When you arrive for the test, a blood sample is taken to measure your fasting blood glucose level, after which you drink a glucose solution. Your blood is then drawn every hour for the next 3 hours.

If one of these 3 readings turns out to be abnormal, you may have to take another test later in your pregnancy. Your practitioner may ask you to make some changes in your diet and exercise routine. If too many of your readings are abnormal, you may be diagnosed with gestational diabetes. Your practitioner will talk to you about a treatment plan.

What happens if I'm diagnosed with gestational diabetes?

You'll work with your practitioner or a diabetes specialist and possibly a nutritionist to come up with a plan to manage your condition.

Your high blood sugar should last only as long as your pregnancy. Some women with gestational diabetes still have persistent elevated blood sugar levels after delivery, and this may represent a group of women who had undiagnosed diabetes before pregnancy. Therefore, your practitioner may have you take another glucose test 6 to 8 weeks after your baby is born.

